

Registration Form – continued

Date of last tetanus shot: _____

Insurance Information:

Policy holder's name: _____

Relation to camper: _____

We have insurance with the following company: _____

Address: _____

All policy numbers (please identify) : _____

In an emergency, I hereby give permission to the physician selected by the adult responsible for the group to hospitalize and/or secure proper treatment for the child named on this form.

Parent/Guardian Signature

Date

Release For Audio, Video, Film and Photographs

All adult and youth participants attending MSU-sponsored events must complete this section. Participants in MSU events are sometimes photographed and videotaped for use in MSUE promotional and educational materials.

I authorize Michigan State University to record and photograph my image and/or voice or that of my child for use by Michigan State University or its assignee in research, educational, and promotional programs. I understand and agree that these audio, video, film, and/or print images may be edited, duplicated, distributed, reproduced, broadcast and/or reformatted in any form and manner without payment of fees, in perpetuity.

Name of youth: _____

Parent/Guardian Signature

Date

Workshop Choices: Rank 1st –4th choices for each (Sessions determined on a first come first serve basis.) Sessions may be changed without notice

Workshop One: ___ ___ ___ ___

Workshop Two: ___ ___ ___ ___

Workshop Three: ___ ___ ___ ___

Workshop Four: ___ ___ ___ ___

Workshop Five: ___ ___ ___ ___

Workshop Six: ___ ___ ___ ___

Please send registration and \$35 payment to your local MSU Extension Office by January 18, 2013. No refunds for no cancellations after January 18, 2012. No refunds for no shows. Makes checks payable to: Michigan State University

Central Region 4-H Youth Programs presents



Saturday, February 2, 2013, through Sunday, February 3, 2013

9-11 year olds

Kettunen Center
14901 4-H Drive
Tustin, MI 49688

Youth Registration Cost: \$35

Non-4-Her's \$45

Chaperone Registration Fee: \$35

Deadline to register is January 18, 2013. Return this form to your local county MSU Extension office.

Registration is on a first come first serve basis. Only 10 youth per county may attend.

Make Checks Payable to: Michigan State University



MICHIGAN STATE
UNIVERSITY

Extension

Session Choices

Workshop #1 Saturday 1:00 – 2:00 p.m.

- A Outdoor Cooking
- B Shooting Sports
- C Fun Foods and Nutrition
- D Tie Die

Workshop #2 Saturday 2:15 – 3:15 p.m.

- E Outdoor Cooking
- F Shooting Sports
- G Fun Foods and Nutrition
- H Tie Die

Workshop #3 Saturday 6:15 – 7:15 p.m.

- I Fly Fishing 101
- J Creative Crafts
- K Hands On Science
- L Life Skill Scavenger Hunt

Workshop #4 Saturday 7:30 – 8:30 p.m.

- M Fly Fishing 101
- N Creative Crafts
- O Hands On Science
- P Life Skill Scavenger Hunt

Workshop #5 Sunday 8:45 – 9:45 a.m.

- Q Shooting Sports
- R Smoothie Creations
- S Crafts, Crafts and more Crafts
- T Outdoor Survival

Workshop #6 Sunday 10:00 – 11:00 a.m.

- U Shooting Sports
- V Smoothie Creations
- W Crafts, Crafts and more Crafts
- X Outdoor Survival

Schedule

Saturday, February 2, 2013

- 9:30 – 10:30 Registration
- 10:30 – 10:45 Welcome & Overview
- 10:45 – 12:00 Group Activity - Finding the Leader in You!
- 12:15 – 12:45 Lunch
- 1:00 – 2:00 Workshop #1
- 2:15 – 3:15 Workshop #2
- 3:15 – 5:00 Outdoor Activities
- 5:00 – 6:00 Dinner
- 6:15 – 7:15 Workshop #3
- 7:30 – 8:30 Workshop #4
- 8:30 – 9:00 Free Time
- 9:00 – 10:30 Group Activity
- 10:30 – 11:00 Get Ready for Bed
- 11:00 Lights Out

Sunday, February 3, 2013

- 8:00 – 8:30 Breakfast
- 8:45 – 9:45 Workshop #5
- 10:00 – 11:00 Workshop #6
- 11:00 – 11:30 Snack and Wrap-up

Youth **must** be picked up by 11:30 a.m.



MICHIGAN STATE UNIVERSITY Extension

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Accommodations for persons with disabilities may be requested by calling MSU Extension - Bay County at (989) 895-4026.

Registration Form – Due by January 18, 2013

Name: _____

Address: _____

City: _____ State: Michigan Zip: _____

Email: _____

Age: _____ Grade: _____ Phone: _____

4-H Member : Yes No Chaperone's name: _____

T-shirt Size: (Circle the size you need)

Youth Small **Youth Medium** **Youth Large**
Adult Medium **Adult Large** **Adult X-large** **Adult XX-Large**

In Case of an Emergency:

Contact: _____

Phone: _____

Relationship: _____

Contact: _____

Phone: _____

Relationship: _____

We need VSP certified adult volunteers to chaperone during Winterfest. Each County is allowed to send 1 female and 1 male adult chaperone. If space allows additional chaperones may be considered. We are asking that chaperones pay the \$35 Registration fee to attend.

Demographic Information

Ethnicity (Optional; Select One): ☐ Not Hispanic ☐ Hispanic

***Gender:** ☐ Female ☐ Male

***Residence** (Select One):

☐ Farm ☐ Town Less than 10,000 ☐ Town 10,000-50,000 ☐ Suburb more than 50,000 ☐ City more than 50,000

Race (Optional; Select All That Apply): ☐ Asian ☐ White ☐ Black

☐ American Indian ☐ Hawaiian & Pacific Islander

Has health considerations/ Medications ☐ Yes ☐ No

If yes, please describe/list: _____

Has dietary considerations ☐ Yes ☐ No

If yes, please describe: _____